DISASTER RELIEF Mobilization:
COMMUNITY RESILIENCY MODEL™
DRM-CRM
A Humanitarian Response

www.traumaresourceinstitute.com
Developed by:
Elaine Miller-Karas, LCSW

The Trauma Resource Institute acknowledges the Gabrieleno/Tongva peoples as the traditional land caretakers of Claremont, California, which is the location of our administrative offices.
**GOALS OF DRM-CRM**

**To provide a structure for preparation to further strengthen resilience so communities can respond to events with strength and compassion and with a common language**

**To create a cadre of Community Resiliency Model Teachers made up of professional and natural leaders of communities**

**To share with children, teens and adults within communities the Community Resiliency Model wellness skills**

**To link community members and survivors to community-based programs and governmental entities that support prevention, resiliency and reconstruction**
The Community Resiliency Model

Community Resiliency Model is a set of six wellness skills which can be used:

- across cultures
- across the lifespan
- with different abilities
- with diverse people
CRM serves both as a proactive measure to enhance community wellness and can be used during or after disasters to reduce the impact of traumatic experiences. This can result in more adaptive thinking when facing emotional and physical distress.

CRM can be delivered in small doses through community workshops or individually by the natural leaders of communities (ministers, teachers, first responders, and more), mental health therapists, and medical practitioners.

CRM wellness skills can be learned for self-care and shared with others undergoing stressful and traumatic situations.
The Community Resiliency Model educates individuals about the intricate biology and neurophysiology associated with trauma, stress, and resilience.

Individuals learning CRM recognize the potential for restoring or enhancing well-being through CRM’s strength-based approach.

CRM is evidence-based, having demonstrated its ability to reduce symptoms related to post-traumatic stress (PTS/STS), depression, and anxiety and improve well-being.
SIX Skills are in the Palms of your Hands

FREE iChill App

*Created from idea by Nobuko Hattori, PhD and Certified CRM Teacher
LEARN CRM SKILLS FROM THE FREE ONLINE WEBINAR SPONSORED BY MEDSCAPE

1.25 CME / CE

Community Resiliency Model (CRM)® Workshop

Have you heard of the Community Resiliency Model (CRM)®? Learn how trauma/stress impact the nervous system and gain skills to help restore resiliency. These skills have been taught to communities throughout the world, and are currently being used in Ukraine to help support community members during an active war.

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Log in to Start

https://www.medscape.org/viewarticle/977302
BEGINNINGS

One or more persons
Learn CRM Skills and become
Inspired and want to share
With wider community

SCALING CRM WITHIN A COMMUNITY

1. Contact local CRM Teacher or TRI to find out about bringing CRM Training to Community

2. Arrange CRM Orientations For natural leaders and community stakeholders

3. The decision to go forward with CRM Teacher Training. Contact TRI to arrange Teacher Training

4. Potential CRM Teacher Trainees Identified. Application process is Initiated. CRM Trainee selection

5. Teacher Training accomplished. CRM skills widely used within Diverse communities. CRM Teachers independent or in relationship with local organizations.
Medical Care (2021)
Size: 104 Front Line Workers
Quasi-experimental study

Front-line workers (FLW) are at risk for secondary traumatic stress, burnout, and related mental health conditions: depression, anxiety, suicidality, posttraumatic stress disorder, and sleep and substance use disorders.

Intervention: 3-Hour CRM Workshop

**Results:**

Well-being and Resilience scores increased
Secondary traumatic stress scores declined
Somatic symptoms decreased.

Participants reported that an awareness of body sensations as a means of calming themselves helped them when they were overwhelmed.

Community Mental Health Journal (2021)
Mental Health Services Act, California Innovation Project

CRM was taught to a high-crime, low-income community designated as a Mental Health Provider Shortage Area.

Five groups of Latino, African-American, LGBTQ, Asian Pacific Islander, and Veteran participants (N=57) with a history of complex/cumulative traumas and untreated posttraumatic stress underwent a five-day 40-h CRM training.

Six months later:

**Survey Results:**
Statistically significant decreases in the number of hostility, anxiety, and somatic symptoms.
Increases in symptoms related to being more relaxed, being content, and being friendlier.
UNITED NATIONS-TAYLOR AND FRANCIS (ROUTLEDGE) selects

Building Resilience To Trauma,
The Trauma and Community Resiliency Models
By: Elaine Miller-Karas

Online curated library
Sustainable Goals Online:- https://www.taylorfrancis.com/sdgo/

To support the UN’s call to action to end poverty, fight inequality and injustice and protect the planet.

• Website of the Trauma Resource Institute, California, USA
  www.traumaresourceinstitute.org

• Selection of scientific studies on the impact of the Community Resiliency Model (CRM)®
  www.traumaresourceinstitute.com/research

• Books and workbooks of the Trauma Resource Institute
  www.traumaresourceinstitute.com/materials